



Government of
Saskatchewan

Annual Report 1991-1992

Saskatchewan Health

Contents

Letters of Transmittal	ii
Executive Report	iii
Saskatchewan Health's Goals	iv
Saskatchewan's Health System, 1991-92	vi
Highlights	vii
Community Health-Prevention Services	1
Community Health-Treatment Services	4
Mental Health Services	5
Northern Health Services	8
Health Promotion	10
Laboratory and Disease Control Services	11
Urban Hospitals and Rural Health Facilities	13
Continuing Care	16
Planning and Construction	17
Medical Care Insurance	18
Prescription Drug Services	19
Vital Statistics & Health Insurance Registration	20
Policy and Health Economics	21
Corporate Information and Technology	23
Human Resources and Fee Negotiation	24
Communications	25
Finance and Administration	26
Summary of Legislation	29

Tables

1. Hospital Services Payments, 1991-92	15
2. Medical Care Insurance Branch Expenditures, 1991-92	18
3. Vital Statistics, 1990 and 1991 (Calendar Year)	20
4. Primary Registration Activities	20
5. Saskatchewan Health Revenue and Expenditures, 1990-91 to 1991-92	27

Figures

1. Saskatchewan Health Organization Chart	v
2. Community Health-Prevention Services, Health Regions	2
3. Mental Health Services	6
4. Sexually Transmitted Diseases	11
5. Vacancy Rates for Selected Health Occupations	21
6. Saskatchewan Health Expenditures, 1991-92	28
7. Saskatchewan Health Program Spending, 1991-92	28
8. Saskatchewan Health Person-Years, 1991-92	28

Letters of Transmittal

To Her Honour the Honourable Sylvia O. Fedoruk
Lieutenant-Governor of Saskatchewan



May it Please Your Honour:

I respectfully submit, for your consideration, the
annual report of Saskatchewan Health for the fiscal
year ending March 31, 1992.

Respectfully submitted,

A handwritten signature in cursive script, appearing to read "Louise Simard".

The Honourable Louise Simard
Minister of Health

To the Honourable Louise Simard
Minister of Health



Dear Ms Simard:

On behalf of department staff, I am pleased to present
the annual report of Saskatchewan Health for your
consideration. In accordance with *The Department of
Health Act, The Prescription Drugs Act, The
Saskatchewan Medical Care Insurance Act, and The
Vital Statistics Act*, this report covers the activities of
the department for the fiscal year ending March 31,
1992.

Respectfully submitted,

A handwritten signature in cursive script, appearing to read "N. Duane Adams".

N. Duane Adams
Deputy Minister

Executive Report

Current Situation

Saskatchewan Health is committed to the good health of Saskatchewan people. As the department sets about achieving that goal, one needs to realize how Saskatchewan has changed since the health system was first implemented. Health costs are increasing and the population is aging. Rural areas have proportionately more older people than do urban areas, and more people are moving from rural to urban centres. In order to achieve a more cost-effective and responsive health system, the department must find ways to reallocate existing funds to high priority needs.

At the same time, the department recognizes that more health care doesn't necessarily lead to people having better health. For instance, the state of people's health is influenced by age, income, education, gender, race and geography. As it focuses on "health" rather than "health care," the department needs to consider how energy, talent and resources can best be used and redirected.

Future Plans

The basis of this focus is the concept of "wellness," where health is seen as an interweaving of health-enhancing public policies, informed personal decision-making and behaviour, supportive environments and needed health services. Reform also means basic changes in the way the department funds and manages the health system. Services must be coordinated, integrated and changed to reflect the economic and demographic reality in Saskatchewan in the 1990s.

With the appointment of health boards for the cities of Saskatoon and Regina, the department took the first step toward this new system based on wellness. The province will provide funding to the boards to deliver all hospital services and to coordinate a full range of other health services in those centres. The boards will examine options for integrating services and resources to best meet community needs. More and more communities are working toward combining home care, hospital, special-care home and ambulance services under one management; more communities plan to follow this example. By redirecting focus from institutions to community-based resources, the system can begin to place more emphasis on illness prevention and wellness promotion.

The department has taken another step toward a more effective and efficient health system by establishing an independent panel to study health service use in the province. The Health Services Utilization and Research Commission will examine usage patterns in Saskatchewan to determine how and why services are used and provided in the province.

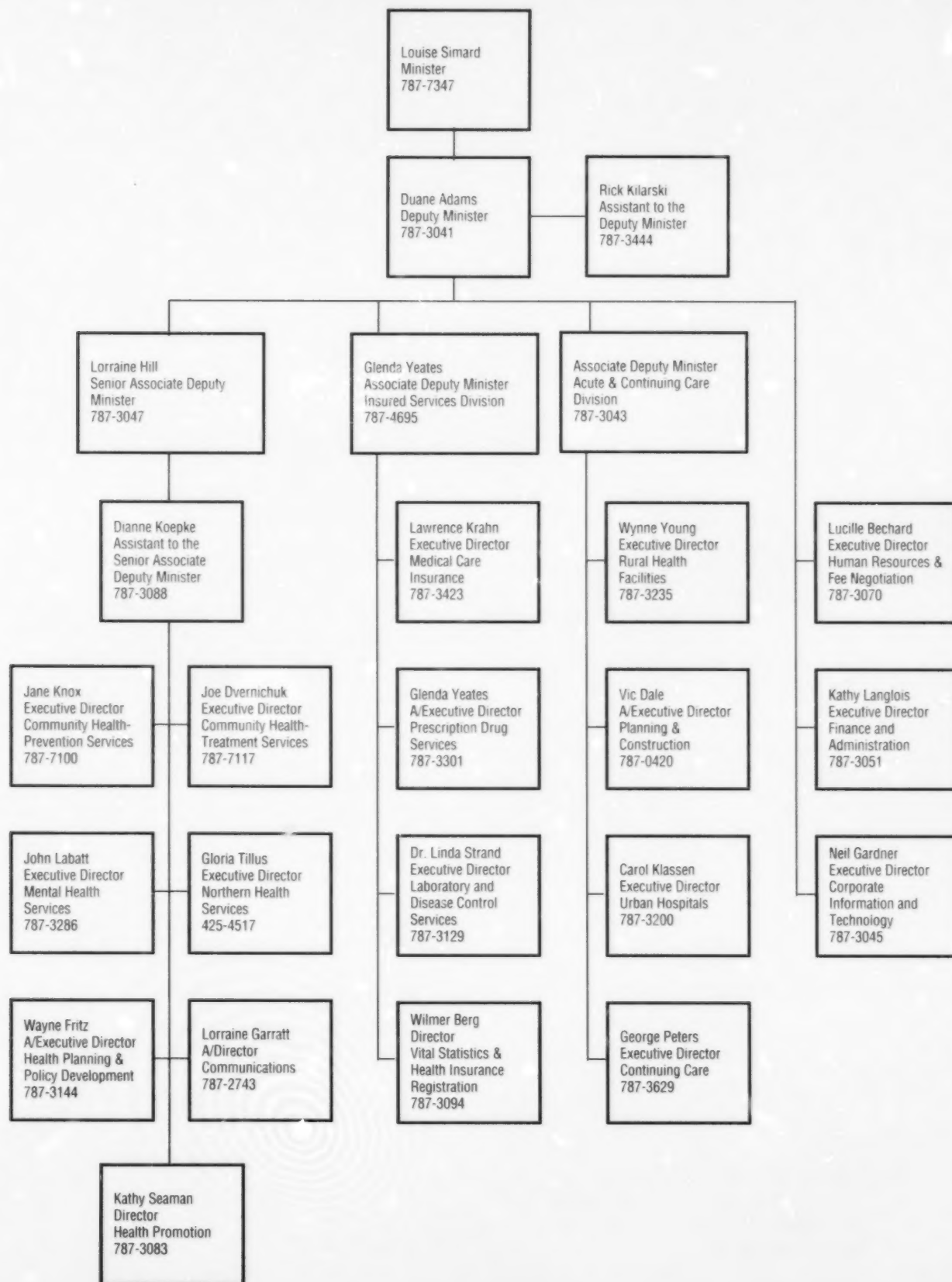
Saskatchewan Health looks forward to further defining and putting into effect a strategy for reforming and improving the health system next year, moving it along to a community-sensitive system based on wellness.

Saskatchewan Health's Goals

- To provide leadership in achieving health for Saskatchewan people
- To advocate the implementation of healthy public policies by communities and all levels of government
- To promote healthy living and encourage responsible decisions regarding personal health
- To ensure the provision of a comprehensive range of health promotion, disease prevention, diagnostic, treatment, rehabilitative and supportive living services
- To provide equitable access to health services
- To facilitate and strengthen community-based services
- To provide effective products and services that contribute to health
- To ensure planning, evaluation and research of health and health services
- To foster the sharing of responsibility and accountability for health with individuals, families, service providers, communities and other governments
- To ensure that health services are integrated and coordinated
- To ensure fiscal responsibility throughout the health system



Figure 1
Saskatchewan Health Organization Chart



Saskatchewan's Health System, 1991-92*

Covered Population (at June 30, 1991)

- 1,010,526

Department Expenditure

- Spending totalled more than \$1.6 billion

Department Revenue

- Revenue totalled almost \$35.9 million

Home Care

- 45 home care districts in southern Saskatchewan and 10 community-based programs in northern Saskatchewan
- Almost 7,000 meals delivered each week to home care clients in the 45 home care districts
- 150,000 hours of nursing provided to 10,300 clients and about 13,000 clients supported with 877,000 hours of homemaking

Mental Health Services

- 79 communities with regularly scheduled mental health services; staff based in 3 northern communities provide various mental health services to residents of 32 communities throughout the north
- 182 approved homes, 11 group homes and 106 supervised apartment spaces
- More than 17,000 Saskatchewan residents received mental health services in the community from staff in Mental Health Services Branch and Northern Health Services Branch

Community Health Services

- 10 regional offices and 46 district offices in the south; 6 primary care centres, 4 public health offices and 12 satellite communities receiving public health services in the north
- 123,221 immunizations for children in the south
- 33,000 contacts with clients in six northern communities through nursing and physician clinics
- 2,723 inspections of eating establishments such as restaurants and concession stands

Health Professionals

- 1,488 physicians; 125 chiropractors; 98 optometrists; 352 dentists and 874 community and hospital pharmacists

- 9,613 registered nurses; 1,024 registered psychiatric nurses and 2,520 certified nursing assistants (at December 31, 1991)

Assistive Devices

- 36,400 wheelchairs and ambulatory and environmental aids lent to people with disabilities

Medical Care Insurance

- More than 9.6 million claims totalling \$285 million
- The average annual cost of physician services per person treated was \$288.04

Prescription Drug Services

- 5.6 million claims totalling \$91.2 million
- 2,043 drugs covered by the Saskatchewan Formulary

Ambulance Services

- 108 ambulance boards
- 67,358 road ambulance trips; 675 air ambulance trips

Laboratory Services

- 901,889 diagnostic tests performed for physicians
- \$821,900 invoiced to researchers for pharmacoepidemiology research projects

Hospitals

- 132 hospitals
- 1,873,392 patient days of care funded in Saskatchewan hospitals
- One long-term psychiatric hospital and 10 hospitals with psychiatric wards

Special-care Homes

- 171 special-care homes, which include 21 integrated facilities (combined acute and long-term care)
- 10,405 long-term care beds in special-care homes and in 99 hospitals

* at March 31, 1992

Highlights

- **Established the Wellness Project Team** to recommend a strategy for health reform.
- **Saw the appointment of health boards for Saskatoon and Regina.** The province will provide funding to the boards to deliver all hospital services and to coordinate a full range of other health services in those centres.
- **Established the Health Services Utilization and Research Commission** to examine health service usage patterns in Saskatchewan and to determine how and why services are used and provided in the province.
- **Provided capital funding associated with space and facilities for the province's first Magnetic Resonance Imaging (MRI) unit.** This unit, located at Royal University Hospital in Saskatoon, will allow medical professionals ready access to new and more precise diagnostic information which can directly improve in-province treatment and lead to shorter hospital stays for patients.
- **Published four editions of Healthy Living newsletter,** which has a distribution of 85,000 and is sent to individual households, businesses and health networks.
- **Emphasized new strategic community-based suicide prevention initiatives** by assigning a new staff position to each of the eight mental health regions.
- **Initiated development of a computer research database.** This system will further integrate health data by allowing branches to share information, which in turn, helps the department to work in a more cost-efficient way.
- **Co-hosted an HIV counselling workshop** for 75 invited delegates from a cross-section of Saskatchewan communities. The department hosted it with Health and Welfare Canada and the Federal Centre for AIDS.
- **Continued to work with researchers** interested in studying the beneficial and adverse effects of drugs on the population. Saskatchewan Health's comprehensive data are recognized internationally as a resource for this research.
- In cooperation with the Saskatchewan Medical Association, **awarded 15 new bursaries to medical students** who will practise in rural Saskatchewan.

Community Health-Prevention Services

Objectives

The Community Health-Prevention Services Branch aims to protect, support and improve people's health by providing community-based services. Services include public health nursing, public health inspection, nutrition counselling, early childhood psychology, speech and language therapy, and dental health education.

The branch also helps fund prevention activities of the health departments in Regina and Saskatoon, and provides funds to a number of non-government organizations.

Highlights

- Completed a successful first full year of participation in the Saskatchewan Heart Health Program, part of the Canadian Federal/Provincial Heart Health Initiative. This program aims to reduce the incidence of heart disease in the province.
- Began a complete revision of *The Public Health Act*. The branch consulted extensively with other departments, agencies, municipalities and members of the public to ensure legislation is up-to-date and prevention-oriented.
- Saw 3,862 food service workers complete the Saskatchewan National Sanitation Training Program and 214 people graduate from swimming pool operators courses.
- Produced a series of brochures designed to educate parents on how to stimulate normal speech and language development in their children from **newborn** to five years of age.
- **Evaluated** and began revising the Early Childhood Psychology program. Results revealed a need for **more** follow-up services and more education of parents and **professionals** about parent skills.
- **Extended Fluoride Mouthrinse Programs** to 28 new schools for a total of **more than 15,000** students participating in a **weekly fluoride rinsing** program.
- **Increased participation in the preschool dental health education program by 58 per cent.**

Organization

The province is divided into 10 health regions which cover all areas, **excluding** Regina, Saskatoon and northern Saskatchewan. (The city health departments

are responsible for Regina* and Saskatoon*, while Northern Health Services Branch covers northern Saskatchewan.) Health region staff is located in the regional offices and 46 district offices to enable delivery of services at the local level. The central office in Regina is responsible for the overall operation, administration and coordination of community-based services and activities.

Major Activities

Regional Director/Medical Health Officer

The regional director/medical health officer is responsible for the overall medical and administrative direction of public health programming in each health region. Medical health officers monitor epidemiological and statistical information, advise other health professionals, and enforce standards of child health, communicable disease, immunization and environmental programs. Special emphasis is placed on regional programs which emphasize the family, the environment and lifestyle choices.

Nutrition

Nutritionists assess the nutrition needs of the community, and coordinate nutrition programs which promote good health and reduce the risk of disease. They place emphasis on healthy babies and children, and reducing the risk of heart disease, cancer and other chronic illnesses.

Public Health Nursing

Public health nurses deliver programs aimed at reducing communicable diseases, improving prenatal care, intervening at an early stage for vision, hearing and speech problems, decreasing family violence and stress, and developing healthy family relationships.

Public Health Inspection

Public health inspectors protect the public from physical, chemical and biological hazards. They offer education programs, enforce regulations under *The Public Health Act* and control shoreland pollution. As well, they ensure a safe water and milk supply, enforce standards for eating establishments and public swimming facilities, inspect new plumbing installations, and ensure general sanitation.

* except for dental health education services, which the department provides

Figure 2
Community Health-Prevention Services, Health Regions



Key for Health Regions

- No. 1 Swift Current (44,534)
- No. 2 Moose Jaw-Assiniboia-Gravelbourg (64,315)
- No. 3 Weyburn-Estevan (48,683)
- No. 4 Regina Rural (75,647)
- No. 5 Rosetown-Biggar-Kindersley (37,856)
- No. 6 Saskatoon Rural (47,231)
- No. 7 Yorkton-Melville (76,543)
- No. 8 Melfort-Tisdale (67,861)
- No. 9 Prince Albert (78,880)
- No. 10 North Battleford (91,029)
- No. 11 Regina city (175,360)
- No. 12 Saskatoon city (180,794)

Note: Population served is given in parentheses - covered population at June 30, 1991 included Registered Indians and excluded northern Saskatchewan.

The population shown for North Battleford Health Region 13 includes the Alberta side of Lloydminster city (10,201).

- Regional Office
- * District Office
- City Health Office

Early Childhood Psychology

Early childhood psychologists work with children and their families to identify developmental and behavioural problems. These psychologists intervene at the earliest possible age to help children function better in society and improve family relationships. They do this through assessment, therapy, counselling, and consultation with other agencies.

Speech Language Pathology

Speech language pathologists identify and treat communication disorders at the earliest possible age through diagnostic, consultative, therapeutic and educational services. They also help prevent speech and language delays by counselling and educating parents about normal speech development.

Dental Health Education

Dental health educators provide preventive programs aimed at reducing dental disease and promoting good oral health. They direct these programs toward preschool and school-age children, post-natal groups, seniors and people in other special-need groups.

For more information and/or an annual statistical report, contact:

Community Health-Prevention Services Branch
Saskatchewan Health
3475 Albert Street
Regina, Saskatchewan
S4S 6X6
Phone: (306) 787-1501

Community Health Treatment Services

Objectives

The Community Health-Treatment Services Branch is organized to bring treatment, rehabilitation and support services to people in their own communities. These services include physiotherapy and occupational therapy, chiropody, audiological and other services for the hearing-impaired, and equipment loan and other support for people with disabilities.

Highlights

- Extended the Community Therapy program to include five more special-care homes. Service is now provided to 95 hospitals and 103 special-care homes in 119 communities. Total patient treatments this year increased by 24 per cent.
- Continued a review of the Saskatchewan Aids to Independent Living program, including its mandate, focus and range of benefits. The branch expanded the review process by including public consultations with agencies and organizations representing people who are physically disabled.
- Introduced service fees for chiropodist and audiologist services.

Organization

The branch provides central direction and coordination for program service delivery units in 30 locations, taking service into 119 Saskatchewan communities through a network of clinics, satellite clinics and outpatient therapy centres.

Major Activities

Community Therapy

Community therapists treat people with physical and functional disabilities, and consult with and educate the public and other health professionals. These physiotherapists and occupational therapists provide service to rural hospitals, rural special-care homes, community health agencies, community groups and people in their own homes.

Saskatchewan Hearing Aid Plan

Audiologists provide comprehensive hearing testing, counselling and education services, while audiometric technicians focus on hearing aid fittings and related technical services. As well, the plan provides for repair services and high quality aids, loaner aids at no charge, and FM hearing aids to hearing-impaired preschool children. Services are available through seven full-time and five part-time clinics.

Chiropody

Chiropodists treat foot problems through medical, mechanical and minor surgical means. Services are primarily directed toward the elderly; however, everyone has access. Services are available through 10 main regional and 23 satellite clinic locations.

Saskatchewan Aids to Independent Living

This program aims to maintain or improve the independence of people with disabilities by providing them equipment and other support. Referral by designated health professionals entitles people to be registered for benefits such as mobility and environmental aids and other special equipment, as well as support for costs of drugs and supplies required by certain conditions.

For more information and/or an annual statistical report, contact:

Community Health-Treatment Services Branch
Saskatchewan Health
3475 Albert Street
Regina, Saskatchewan
S4S 6X6
Phone: (306) 787-7107

Mental Health Services

Objectives

The Mental Health Services Branch ensures that all residents have access to comprehensive mental health services. The branch provides or oversees a full range of community-based services and hospital programs in each of the eight mental health regions, emphasizing mental health promotion and illness prevention in all its services. Private practitioners and voluntary non-profit organizations provide complementary services.

Highlights

- Saw the Saskatchewan Mental Health Advisory Council become operational and submit its first report to the Minister of Health. Made up of consumers, family members, service providers and those with an interest in mental health, the council advises the minister on policies, programs, priorities and resources required to meet the mental health needs of Saskatchewan residents.
- Continued to operate one of Canada's most extensive and comprehensive community-based mental health services by providing services on a regular basis in 79 communities.
- Emphasized new strategic community-based suicide prevention initiatives by assigning a new staff position to each of the eight mental health regions.
- Increased funding and made more extensive use of personal service contracts where community members provide services to people with long-term psychiatric disabilities and to people at-risk.
- Completed a five-year strategic plan for rehabilitative services based on A Framework for Support in consultation with community-based key stakeholders. The plan outlines roles of the branch, non-government organizations, consumers and their families and others.
- Focused on recruiting and retaining highly-trained mental health professionals by offering bursaries, advertising extensively and producing a new recruitment booklet.
- (The department) provided slightly more than \$1,000,000 to support psychiatric research at the University of Saskatchewan.

Organization

The branch is responsible for mental health services in the eight mental health regions in southern Saskatchewan. (See Figure 3.) It employs psychiatrists, psychologists, social workers, psychiatric nurses and therapists. Services are organized into five areas: adult/community, child and youth, rehabilitation and residential, inpatient and forensic. Many mental health services are provided in partnership with non-government organizations, health professionals in private practice and volunteers.

Major Activities

Adult Community Services

The branch provides direct and indirect clinical and consulting services for adults through diagnostic and treatment services, counselling and support for community clients, treatment of a wide variety of mental health problems, and consultation and support to other agencies. The branch encourages and assists people in participating in their own care.

Child and Youth Services

The branch uses a wide range of individual counselling and family and group work methods to treat children and teenagers experiencing emotional problems. Services to children and youth are delivered in all eight mental health regions and are managed directly by the branch. Freestanding specialist facilities exist in Regina Child and Youth Services and at MacNeill Clinic in Saskatoon. These clinics function as major referral centres.

Rehabilitation and Residential Services

The branch offers psychiatric rehabilitation, which includes case management and social and vocational rehabilitation services, for people with long-term mental illness.

In cooperation with government departments and non-government agencies, the branch provides support for members' clubs and community service centres for recovering patients; family support groups; transitional employment programs; social skills training; case management services; and consultation, planning and information on all aspects of psychiatric rehabilitation.

Figure 3 Mental Health Services



Key

- ◆ Saskatchewan Hospital North Battleford
- ◆ Psychiatric Ward
 - Mental Health Main Centre
 - Clinic with Resident Staff
 - Part-time Mental Health Clinic
 - Community Liaison Workers

The branch makes extensive use of personal service contracts where community members provide services to people with long-term psychiatric disabilities and to people at-risk.

The branch funds 182 approved boarding homes, 11 group homes, 106 supervised apartment spaces and follow-up programs to people living on their own or with their families. The branch funds 18 non-government organizations to provide community-based rehabilitation services to people with chronic mental illness. These services complement and supplement those services provided directly by the branch.

Inpatient Services

The branch provides diagnostic and treatment services to acute care clients on an inpatient basis in all eight regions. Saskatchewan residents are hospitalized for mental disorders as frequently as residents of other provinces, but they are more likely to be cared for in community hospitals and to remain in care for shorter periods of time. This year, there were 2,261 admissions to mental health centres and each person stayed an average of 24 days. The centres cared for an average of 126.3 clients each day.

The branch operates the Saskatchewan Hospital North Battleford, which is the only provincial mental health facility to provide long-term care and rehabilitation services on an inpatient basis. This year, it provided inpatient services to an average of 171 clients each day.

Forensic Services

The branch provides services for people in conflict with the law. Services to the court include court-ordered assessments of youth and adults to determine the presence of mental disorders, suitability to stand

trial and need for treatment. Inpatient assessment and treatment services are provided in branch-operated facilities and in the federal Regional Psychiatric Centre in Saskatoon on behalf of the province.

The branch provides specialized treatment services for adolescent and adult sex offenders in several centres. There are specialized treatment programs for perpetrators of domestic violence in some centres. Services are also provided to victims of abuse and violence.

Prevention and Promotion

The branch is involved in and supports mental health public education, promotion and prevention activities. In partnership with other government, non-government and community agencies, it participated in Family Forums and workshops for farm families as well as in establishing a farm stress telephone line. During the year it supported and helped develop TV and radio public service announcements for the Mental Health Association; mental health promotion posters; and education programs on family violence, schizophrenia and anxiety.

For more information and/or an annual statistical report, contact:

Mental Health Services Branch
Saskatchewan Health
3475 Albert Street
Regina, Saskatchewan
S4S 6X6
Phone: (306) 787-3286

Northern Health Services

Objectives

Northern Health Services Branch provides a variety of health services to residents of northern Saskatchewan. These include primary care, public health nursing, mental health services, physician services, children's dental services, home care, public health inspection, nutrition counselling, speech and language pathology, health education and medical health officer consultation.

Highlights

- Made more than 33,000 contacts with clients in six communities through nursing and physician clinics in primary care health centres.
- Implemented the Nobody's Perfect parenting program in Beauval and La Ronge. An education program for parents of preschool children, it is specifically intended to meet the needs of young, single, low-income, and socially and geographically isolated parents.

Organization

The branch is organized on a program basis, each program reporting to the executive director.

Major Activities

Dental

The northern Children's Dental program provides dental health education and treatment to children up to 17 years of age and to adults on an emergency basis. This year, about 4,500 children saw a dentist at least once and a visiting dental team more often.

Nursing

Public health and primary care nurses provide preventive programs and wellness education on topics such as prenatal care and parenting skills. Nineteen nurses are based in 10 communities. Making about 33,000 contacts, thirteen of these nurses provide primary medical services and emergency care to residents of six northern communities who do not have ready access to physician services or hospitals. A nurse epidemiologist who works closely with the medical health officer coordinates communicable disease control and surveillance.

Medical Health Officer

A part-time medical health officer provides consultation on a wide variety of community health issues, including communicable and chronic disease control and promotion of good health and well-being.

Home Care

Community-based home care programs are designed to allow northerners to remain in their own homes as long as possible rather than seeking institutional care. These programs also allow people to return home sooner following hospitalization. Home care staff serves more than 400 clients.

Public Health Inspection

Public health inspectors protect the public from physical, chemical and biological hazards. They also educate people about environmental health, particularly proper food handling.

Health Education

Four health educators, one nutritionist and 15 community health educators promote healthy lifestyles and focus on disease prevention through health fairs, workshops and individual consultations. They do this by working with other health agencies and northern communities.

Mental Health

Community mental health nurses and mental health social workers ensure that people with mental health problems receive assistance and counselling. They do this by maintaining regular contact with all northern communities, including clinics, the courts, Social Services agencies and Indian band offices. These health professionals provide social and vocational training, a mental health education and public awareness program, and assessment and counselling throughout the north.

Physician Services

Several physician groups provide visiting services to communities. An agreement between the federal and provincial governments and the University of Saskatchewan funds the Northern Medical Services Unit which provides physician services in the hospital at Ile a la Crosse and area and at the Uranium City Hospital and area. Contracts with physician groups in Flin Flon, La Ronge, Nipawin and La Loche provide regular physician services to surrounding communities.

Speech Language Pathology

Speech language pathologists provide assessment, treatment, consultation and prevention services to preschool children and adults. Preschool children who are involved in other programs such as early childhood intervention programs are considered a priority. Caseload numbers vary from 90 to 120 clients.

Medical Transportation

The medical transportation coordinator arranges non-emergency transportation for people receiving social assistance who are referred by authorized health professionals. Some coordination is also provided to treaty Indian patients with the same need.

For more information, contact:

Northern Health Services Branch
Saskatchewan Health
Box 5000
La Ronge, Saskatchewan
S0J 1L0
Phone: (306) 425-4510
Toll-free: 1-800-772-4069

Health Promotion

Objectives

The Health Promotion Branch helps educate the public on health and lifestyle improvements. It also provides educational and resource centre support to government departments and other providers of health services.

Highlights

- Published four editions of Healthy Living newsletter, which has a distribution of 85,000 and is sent to individual households, businesses and health networks.
- Promoted the EVERYONE WINS program by developing and providing information materials, participating in public gatherings and special events, and by speaking to community, business and health professional groups.
- Distributed a total of 715,600 publications to schools, day-cares, special-care homes, non-government organizations, other government departments and to the general public.
- Continued to provide a range of Healthy Living services, including:
 - the Healthy Living Centre in Regina which provides public access to a wide range of print information and interactive computer programming;
 - the Healthy Living Health Information Line which offers callers recorded health messages on various health topics; and
 - the Healthy Living Educational Series for businesses which offers learning opportunities for employees.
- Provided community and sponsorship grants totalling \$229,366 to 140 community groups and organizations to develop and present health promotion projects.
- Continued to target programming to special groups such as seniors, aboriginal people, and people with low-level reading skills.
- Worked with the Saskatchewan Low Literacy Network in developing a special insert on AIDS which was distributed throughout Saskatchewan.
- Completed a survey of participants in the Quit Smoking & Win contest a year after it was completed. Of 300 people surveyed, 180 still remain smoke-free.
- Completed a pilot home study course on healthy eating, in which about 400 people participated. Preliminary research shows that more than 80 per cent of participants significantly changed their eating behaviour.
- Began preparing a second home study pilot entitled Getting Fit - Staying Fit.
- Distributed the third edition of the Non-Smoking Sun to all children in grades five and six in Saskatchewan.
- Sent the We Love Kids awareness campaign to all tobacco retailers in Saskatchewan, encouraging them to prohibit tobacco sales to minors.
- Provided resource centre information to staff throughout the province and to 803 borrowers, representing staff, health professionals and university students.

Organization

The branch includes the Health Promotion and Education Unit, and the Resource Centre.

Major Activities

- Sponsored the third Team Health tour by Saskatchewan Roughriders to 325 schools involving more than 30,000 students. Team Health members also visited a number of northern communities for the first time: Wollaston Lake, Stony Rapids, La Loche, Buffalo Narrows and Cumberland House.

For more information, contact:

Health Promotion Branch
Saskatchewan Health
3475 Albert Street
Regina, Saskatchewan
S4S 0X8
Phone: (306) 767-3084
Toll-free: 1-800-667-7766



Laboratory and Disease Control Services

Objectives

The *Laboratory and Disease Control Services Branch* operates laboratories that perform tests on specimens received from hospitals and physicians, and on specimens collected for environmental monitoring. The branch collects and analyzes statistics on the incidence of communicable disease in the province, and distributes vaccines to hospitals, doctors' offices, health regions and other medical centres. The branch also manages the Tuberculosis Control Program, including identification, treatment, monitoring, education and prevention.

As well, the branch researches and assesses the adverse and beneficial effects of drugs on the population while the Laboratory Licensing Unit administers *The Medical Laboratory Licensing Act*.

Highlights

- Identified one baby with phenylketonuria (PKU) and identified three babies with hypothyroidism. Early diagnosis enables treatment and prevents retardation.
- Performed 901,889 tests for physicians requesting clinical diagnostic services in bacteriology, chemistry, mycology, radiochemistry, serology, toxicology, urine hormones and virology.
- The Medical Laboratory Licensing Unit issued licenses to 467 Saskatchewan medical laboratories, of which almost half were located in physicians' offices.

Organization

The branch is organized along major program lines: Provincial Clinical Laboratory (comprising Microbiology, Chemistry and Toxicology), Environmental Sciences Laboratory, Communicable Disease Control, Tuberculosis Control, Pharmacoepidemiology, Medical Laboratory Licensing (this unit transferred to the Medical Care Insurance Branch on January 1, 1992) and Support Services.

Major Activities

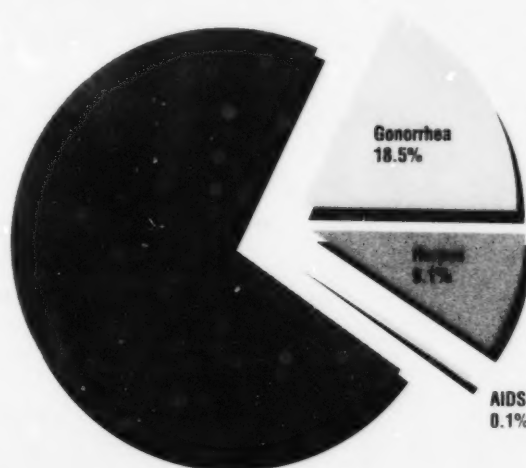
Communicable Disease Control

The Communicable Disease Control Unit offers consultation and support services to health professionals and individuals, and distributes vaccines and biologicals for disease prevention and treatment. The division serves as the main agency for the

collection and analysis of communicable disease statistics. Six cases of AIDS were reported in 1991 compared with 15 cases in 1990. The number of Saskatchewan cases remains lower than the national average with a cumulative number of 53 cases reported. There have been 38 deaths.

The Tuberculosis Control Program provides a broad range of services to diagnose, treat and prevent tuberculosis. In northern communities, mobile clinics ensure cases are diagnosed early and provide drugs to control the disease.

Figure 4
Sexually Transmitted Diseases
Proportions of Cases by Disease Reported



Protective Tests

The branch conducts tests on selected specimens to detect unsuspected threats to health. These tests allow corrective or defensive measures to be adopted before serious harm is done. In this year, the branch:

- tested water supplies from municipal systems, private wells and swimming pools;
- analyzed air samples from foam-insulated homes to check for formaldehyde;
- tested fish from Saskatchewan lakes and rivers for mercury;
- carried out 8,465 tests on retail dairy products; and
- screened newborn babies for phenylketonuria (PKU) and hypothyroidism.

Clinical Diagnostic Services

Modern medicine relies on laboratory tests to aid in the early diagnosis of illness and to permit timely treatment when required. In this year, the Provincial Clinical Laboratories:

- performed diagnostic tests for physicians;
- assisted in 516 medicolegal investigations (a 24-hour poison identification service is available to physicians to aid in diagnosing patients who ingest a poison or drug); and
- offered technical advice to diagnostic laboratories on test procedures.

Research Activities

The Pharmacoepidemiology Unit works with researchers interested in studying the beneficial and adverse effects of drugs on the population. Saskatchewan Health's comprehensive data are recognized internationally as a resource for this research.

Medical Laboratory Licensing

The Licensing Unit administers *The Medical Laboratory Licensing Act*. Effective January 1, 1992, this unit became part of the Medical Care Insurance Branch.

For information concerning the Licensing Unit, contact:

Medical Laboratory Licensing Unit
Saskatchewan Health
3475 Albert Street
Regina, Saskatchewan
S4S 6X6
Phone: (306) 787-8264

For other information and/or an annual statistical report, contact:

Laboratory and Disease Control Services Branch
Saskatchewan Health
3211 Albert Street
Regina, Saskatchewan
S4S 5W6
Phone: (306) 787-3131

Urban Hospitals and Rural Health Facilities

The Urban Hospitals and Rural Health Facilities Branches manage the province's Hospital Care Insurance Plan and the Ambulance Program. They also provide funds to the Saskatchewan Cancer Foundation, community clinics, physical therapy clinics, community health and social centres, the College of Medicine, the Canadian Red Cross Society and other groups.

Highlights

- Established the Saskatoon and Regina Health Boards which will deliver a range of health services including acute care, special-care homes and home care. The boards will be instrumental in improving the system through greater integration of services and community-focused decision making.
- Established a multi-disciplinary working group, which analyzed the rate of tonsillectomies in the province, and developed specific strategies to address the current practice.
- Established the province's first Rural Medical Practice Area, encompassing the communities of Shaunavon, Eastend and Climax.
- Purchased and installed a new cobalt unit with the Saskatchewan Cancer Foundation to increase radiation therapy capability at the Allan Blair Memorial Clinic.
- Completed construction of the new St. Joseph's Hospital in Estevan. This 140-bed facility provides acute care, chemical rehabilitation, day hospital and long-term care services.
- Completed construction of six new integrated facilities at Craik, Eatonia, Edam, Imperial, Lafleche and Montmartre.
- Began construction of two hospitals at Broadview and Tisdale and three integrated facilities at Coronach, Oxbow and Rockglen.

Organization

The Urban Hospitals Branch is divided into the following sections: Base Hospital Programs, Regional and Large Community Hospital Programs, Finance, Operational Review and Planning. The Rural Health Facilities Branch is divided into Community Hospital Programs, Systems, Benefits and Ambulance Services.

Major Activities

The branches spent \$770.2 million for programs they administer, including \$619.4 million in operating funds for the province's 132 hospitals. (See Table 1.)

Hospital Care

People receive hospital services at no direct charge for a wide range of diagnostic and therapeutic procedures delivered on an inpatient and outpatient basis.

Ambulance Services

Ambulance Services provides consultative assistance to local ambulance boards and operators. It establishes and monitors standards, licenses services and attendants, and provides operating grants for the province's 108 ambulance boards. It also administers the Air Ambulance and Senior Citizens Ambulance Assistance Programs. A review of the air ambulance program has led to a major upgrading of medical equipment for the air ambulance and backup aircraft in Saskatoon and Regina.

The department is presently licensing about 1,700 ambulance attendants, emergency medical technicians and paramedics. Through training updates, the province's Emergency Medical Technicians-Advanced staff have upgraded to Emergency Medical Technicians-Paramedics.

The department also is setting up a new electronic patient care reporting system to improve statistical information for program development and quality assurance functions.

The Saskatchewan Cancer Foundation

The Saskatchewan Cancer Foundation is responsible for the province's cancer control program and operates the Allan Blair Memorial Clinic in Regina and the Saskatoon Cancer Centre. The foundation also is responsible for the Screening Program for Breast Cancer. This screening program currently operates a stationary centre in Regina, serving women in the city and surrounding area, while a mobile unit provides services to women in areas north of Saskatoon. The program will be expanded in the near future.

Community Clinics

Community clinics offer a wide range of health services provided by physicians and other professionals who are paid on a salaried basis. Community health associations provide clinic facilities and equipment, and the branch provides the operating budgets. Community clinics operate in Regina, Saskatoon, Prince Albert and Wynyard.

Physical Therapy Services

Eleven privately-owned physical therapy clinics provide therapy services under contract with the department. These clinics are located in Regina, Saskatoon, Moose Jaw, Prince Albert, North Battleford and Manitou Beach.

The Clinical Services Fund

The Clinical Services Fund finances more than 200 medical intern and resident positions. It also provides funding for clinical services provided by College of Medicine faculty members and other service-related activities associated with medical education.

Community Health and Social Centres

Community Health and Social Centres provide outpatient diagnostic and treatment services through regular visiting physicians. Other program components include an on-call nurse to provide 24-hour emergency service, public health services, a social activity program primarily for elderly people, and liaison with other community-based programs. Some of these facilities also receive funding from the Seniors' Secretariat.

The Rural Health Facilities Branch formally reviewed the 11 health and social centres during the year. The results of this review showed the need for standardizing services and developing a greater understanding of the communities' needs.

Red Cross Society

The branches fund 100 per cent of the Canadian Red Cross Society's blood transfusion service costs, 100 per cent of plasma fraction products costs, and 80 per cent of blood donor recruitment costs. The Red Cross operates blood transfusion service centres in Regina and Saskatoon.

The Hospital Revenue Act

The Hospital Revenue Act requires municipalities to pay an annual two mill Hospital Revenue Tax if they do not support a hospital by direct payments or by participating in a Union Hospital District. The government disburses these funds to the hospitals those municipalities' residents use most.

Integrated Facilities

Integrated facilities bring together a hospital and a licensed special-care home in one building. They are designed to meet the needs of smaller communities that have limited long-term care and acute care needs. The Rural Health Facilities Branch is responsible for the acute care component of the program, and the Continuing Care Branch has program responsibility for special-care residents. Twenty-one integrated facilities with a total of 254 long-term and 203 acute care beds were operating in the province on March 31, 1992.

Table 1
Hospital Services Payments
1991-92

Payments to Saskatchewan hospitals	\$644,300,493
Less recoveries from Continuing Care and Province of Alberta	(24,926,053)
	619,374,440
Payments to Community Clinics	11,269,183
Private physiotherapy/osteopathy	3,018,249
Payments to the Canadian Red Cross	8,100,016
Miscellaneous grants	3,241,374
Reciprocal billing: in-province hospitals	1,447,066
Payments to out-of-province hospitals	34,486,866
Recoveries from third-party liabilities	(3,863,031)
SUBTOTAL	677,074,163
Grant to Saskatchewan Cancer Foundation	25,925,000
Grants to support the Medical Education System (Clinical Services Fund)	15,018,382
Grants to hospitals under <i>The Hospital Revenue Act</i>	680,388
Grants and allowances for ambulance services	12,523,791
Hospital and ambulance administration	4,527,188
TOTAL OPERATING	\$735,748,912
Grants to hospitals - repayment of principal and interest on capital loans from the Saskatchewan Property Management Corporation	\$ 34,503,770

For more information and/or an annual statistical report, contact:

Urban Hospitals Branch
Saskatchewan Health
3475 Albert Street
Regina, Saskatchewan
S4S 6X6
Phone: (306) 787-7419

Continuing Care

Objectives

The Continuing Care Branch develops and coordinates a range of long-term care services to best preserve the independence and quality of life for people needing support.

Highlights

- Developed a residents' activity handbook that documents recreational therapy ideas from special-care homes.
- Revised the home care funding formula with the Saskatchewan Home Care Association effective April 1, 1992.
- Saw *The Personal Care Homes Act* proclaimed and the regulations come into effect October 1, 1991.
- Completed ten construction projects for a total of 163 new and replacement beds in special-care homes and integrated facilities.

Organization

The branch comprises three program sections: Home Care, Special-care Homes and Personal Care Homes. These sections are supported by administration/information systems and policy units.

Major Activities

Home Care

Home Care helps people remain independent at home by providing acute, palliative and supportive care. The program is designed to supplement the support provided by the family and community.

The program is available in 45 districts in southern Saskatchewan. Each district is served by a non-profit home care corporation with an elected board. Home care services are provided by local boards in 10 communities in northern Saskatchewan, and are coordinated by Northern Health Services Branch.

Home Care provides assessment and care coordination, nursing, homemaking (home management and personal care), meals, minor home maintenance for client safety, and volunteer services coordination. Applicants must have a Saskatchewan health services card and an assessment of need before they receive services. There are no client fees for nursing, volunteer services or assessment and care coordination. Other service fees vary according to the client's income.

Special-care Homes

The Special-care Homes Program ensures that appropriate long-term institutional programs are available to people who need more care and supervision than is available in their own homes.

Services are delivered by 171 special-care homes with 9,674 beds and 99 hospitals with 731 beds. Eighteen facilities have adult day programs, and 83 provide 116 beds for respite care, providing support for family caregivers.

Anyone who requires institutional care is eligible. Facilities are expected to admit clients based on District Coordinating Committee (DCC) recommendations on priority of need. DCCs are established locally to coordinate long-term care and typically are composed of representatives from the local special-care homes, hospitals, home care agencies and housing authorities.

Personal Care Homes

Personal care homes are privately-owned facilities licensed to provide accommodation, meals and assistance with personal care to adults not related to the operator.

The department issued temporary licences to more than 200 homes until it completes inspecting and licensing homes. These homes can accommodate about 1,400 residents.

Potential residents can apply for admission directly through the personal care homes operators. However, Home Care or other approved agencies assess all residents to identify their care needs and most appropriate facility placement. Lists of licensed homes are available from Home Care district offices or hospital social workers.

For more information and/or an annual statistical report, contact:

Continuing Care Branch
Saskatchewan Health
3475 Albert Street
Regina, Saskatchewan
S4S 6X6
Phone: (306) 787-3628

Planning and Construction

Objectives

The Planning and Construction Branch provides leadership, direction and assistance to communities in identifying and planning for their future needs for integrated community-based programs and institutional options. The branch supports the program needs of Continuing Care Branch, Urban Hospitals Branch, Rural Health Facilities Branch and Mental Health Services Branch.

Highlights

- Saw four special-care home projects completed and 10 major projects in planning or construction. Four of these are integrated facilities.
- Saw one major hospital replacement construction project completed and another three under construction.

Organization

In conjunction with Rural Health Facilities and Continuing Care, the branch provides a coordinated and integrated approach to planning health services at the local level. It also involves other branches in this coordinated approach.

Major Activities

- Completed construction on St. Joseph's Hospital in Estevan.
- Completed special-care home projects at Humboldt, Midale, Porcupine Plain and St. Brieux.
- Completed integrated facilities at Craik, Eatonia, Edam, Imperial, Lafleche and Montmartre.
- Continued constructing the new Saskatoon City Hospital.
- Started construction on the new replacement hospitals for Tisdale Union Hospital and Broadview Union Hospital.

For more information, contact:

Planning and Construction Branch
Saskatchewan Health
3475 Albert Street
Regina, Saskatchewan
S4S 6X6
Phone: (306) 787-3268

Medical Care Insurance

Objectives

The Medical Care Insurance Branch manages the Medical Care Insurance Plan, the Children's Dental Program, and the Supplementary Health Program.

Highlights

- Saw 90.2 per cent of Saskatchewan beneficiaries receive insured services during the year from a physician, 23.7 per cent from an optometrist, and 12.7 per cent from a chiropractor. The average annual cost of physician services per person treated was \$288.04.
- Processed more than 9.6 million claims for insured services under the Medical Care Insurance Plan. About 58 per cent of claims are submitted via computer.

Organization

The branch is organized along major program lines: Medical Care Insurance, Children's Dental Program and Supplementary Health.

Major Activities

The branch spent \$309 million on programs and administration.

Table 2
Medical Care Insurance Branch
Expenditures, 1991-92

Medical Care Insurance Plan	\$284,566,848
Supplementary Health Program	7,829,152
Children's Dental Program	10,346,473
Administration	5,563,960
Continuing Medical Education	700,000
Grants to Support Health Services	62,137
TOTAL	\$309,068,570

- Made payments totalling \$303 million under the branch's program areas. Administration costs accounted for another \$5.6 million (two per cent of program costs). The branch also made payments to support the Saskatchewan Medical Association's Continuing Medical Education Fund and a dental residency program.

- Liaised with the various service providers on an ongoing basis to enhance the effectiveness of the programs it administers.

Medical Care Insurance Plan

The cost of insured services is covered for services provided to beneficiaries by physicians, chiropractors and optometrists. Payment generally is made on a fee-for-service basis in accordance with Medical Care Insurance Branch payment schedules, which reflect agreements reached with the various professional associations.

Children's Dental Program

The Children's Dental Program provides preventive services, treatment and dental education services to children ages five to 13 through about 300 private practice dentists.

A total of 142,728 children were eligible to receive services during the program year September 1990 to August 1991. Of these, 81.1 per cent actually received services.

Supplementary Health

Supplementary health benefits cover non-insured health services for people nominated by Saskatchewan Social Services such as social assistance recipients, government wards, inmates of correctional institutions and residents of special-care homes whose income is at or below the Saskatchewan Income Plan level. Coverage includes certain medical and dental services, drugs and appliances, optical services and transportation costs.

For more information, and/or an annual statistical report, contact:

Medical Care Insurance Branch
Saskatchewan Health
3475 Albert Street
Regina, Saskatchewan
S4S 6X6
Phone: (306) 787-3475

Prescription Drug Services

Objectives

The Prescription Drug Services Branch administers the Saskatchewan Prescription Drug Plan. This plan makes prescribed drugs more accessible and affordable to residents, while ensuring quality, availability and therapeutic cost-efficiency.

Highlights

- Continued to support a province-wide telephone drug information service for consumers in cooperation with the College of Pharmacy, University of Saskatchewan.
- Published guidelines for selecting drugs that treat infection — another step in encouraging the rational and safe use of drugs.
- Participated in working groups that reviewed advertising practices and economic analysis of drug therapy.
- Processed almost 5.8 million prescription claims with more than 2,000 drug products eligible for coverage.
- Continued to provide a program of protection against extreme drug costs for more than 945,000 eligible residents, and paid benefits averaging more than 63 per cent of the total value of prescriptions obtained.
- Changed the coverage policy for drugs in an interchangeable group. Effective July 1, 1991, the plan began approving the cost of every product in an interchangeable group only up to the price recorded in the Saskatchewan Formulary for the lowest priced listed product in the group.
- Continued to provide a point-of-service statement on the total prescription value and benefits received, the only health benefit program in Canada to do so.

Organization

The branch is organized into three divisions: Claims, Professional Services and Administration.

Major Activities

- Expanded the drug profile release program which provides prescribers with information about their patients' unusual patterns of drug use. The plan now issues profile releases on a two-week rather than a three-month basis.
- Initiated comprehensive reviews of benzodiazepines (tranquilizers) and cardiovascular drug usage in Saskatchewan.
- Provided more than \$91 million in benefits to Saskatchewan people. This is the highest amount in the 16-year history of the program.
- Provided benefits at an average value of almost \$220 for each Saskatchewan family.
- Maintained annual family deductibles at 1987 levels, the lowest in Canada.
- Issued price-tender calls for almost 2,050 drug products, and awarded more than 500 price contracts for drugs, resulting in price decreases for competitive brands.
- Managed an automated claims network linking 339 Saskatchewan pharmacies with the program.
- Provided more than 297,000 health care advisories to pharmacies, using the plastic card claims network. These advisories resulted in the cancellation of more than 36,400 prescriptions.

For more information and/or an annual statistical report, contact:

Prescription Drug Services Branch
Saskatchewan Health
11th Floor, Avond Tower
2002 Victoria Avenue
Regina, Saskatchewan
S4P 3V7
Phone: (306) 787-3317
Toll-free consumer inquiry line: 1-800-667-7581

Vital Statistics & Health Insurance Registration

Objectives

Vital Statistics registers births, marriages, deaths, divorces, adoptions and name-changes. It also publishes extensive statistical information for other agencies and for the public.

Health Insurance Registration registers Saskatchewan residents for health services, and issues Saskatchewan health services cards. It also provides information for administering numerous provincial government programs, and publishes annual population reports.

Highlights

- Registered 15,847 new families as beneficiaries of Saskatchewan Health programs.
- Issued more than 60,000 vital statistics certificates.

Organization

The branch is divided into two sections: Vital Statistics and Health Insurance Registration.

Major Activities

Vital Statistics works closely with local registrars, most of them municipal secretaries and town/city clerks who regularly report births and deaths. Clergy and marriage commissioners report weddings, while the courts report divorces and adoptions. This information is shared with Statistics Canada in Ottawa for compiling national vital statistics.

Besides registering new or returning residents for health care benefits, Health Insurance Registration closely monitors the population to ensure that only Saskatchewan residents are eligible to receive health care benefits. It does this by working with other agencies, and by liaising with field staff in five locations throughout the province.

Table 3

Vital Statistics 1990 and 1991 (Calendar Year)

	1990	1991*
Population (1,000s)	1,000	997
Live Births	16,090	15,249
Rate per 1,000 Population	16.1	15.3
Deaths	7,953*	8,053
Rate per 1,000 Population	8.0*	8.1
Stillbirths (28+ Weeks Gestation)	62*	61
Rate per 1,000 Live Births	3.9*	4.0
Marriages	6,229	5,922
Rate per 1,000 Population	6.2	5.9
Divorces and Annulments	2,379	2,210
Adoptions in Saskatchewan	705	368
Changes of Name	742	736
Certificates Issued	67,581	65,636

*Preliminary figures

Table 4

Primary Registration Activities

	1990/91	1991/92
New Family Registrations	14,636	15,847
Family Address Changes	96,413	63,966
Deaths	8,363	8,434
All Beneficiary Changes	436,421	322,161
Social Services Nominations and/or Cancellations	43,464	43,464 (est.)
Health Services Cards Mailed	1,155,710*	116,572
Covered Population	1,029,352**	1,010,526**

* includes corrected, replacement and new cards

** as of June 30

For more information and/or an annual statistical report, contact:

Vital Statistics & Health Insurance Registration
Branch
Saskatchewan Health
1919 Rose Street
Regina, Saskatchewan
S4P 3V7
Phone: (306) 787-3092

Policy and Health Economics*

Objectives

The Policy and Health Economics Branch helps develop broad health policies, conducts economic analyses and evaluations of health programs, develops policies regarding human resources in the health sector, and coordinates and brings a broad policy perspective to the development of department legislation.

Highlights

- Examined new ways of delivering and funding health care:
 - by striking an internal committee to review community initiatives;
 - by studying ways of providing a broader range of prevention/promotion and community-based treatment services, and ways of using a variety of health care professionals; and
 - by beginning a pilot community needs assessment for the community of Cabri.
- Completed a feasibility study and took the first steps to establish planning regions to be used in compiling demographic and departmental data along standard geographic boundaries.
- Coordinated a provincial response to the Barer-Stoddart report "Toward Integrated Medical Resource Policies for Canada." This comprehensive report presented a blueprint for managing physician resources in Canada.
- Published an in-depth report based on a study of prescription drug use in Saskatchewan. *Who uses*

prescription drugs? Results from a population-wide study in Saskatchewan will be distributed to health professionals and other interest groups in 1992-93. An article based on the same study was accepted for publication by the Canadian Medical Association Journal (June 1992 issue).

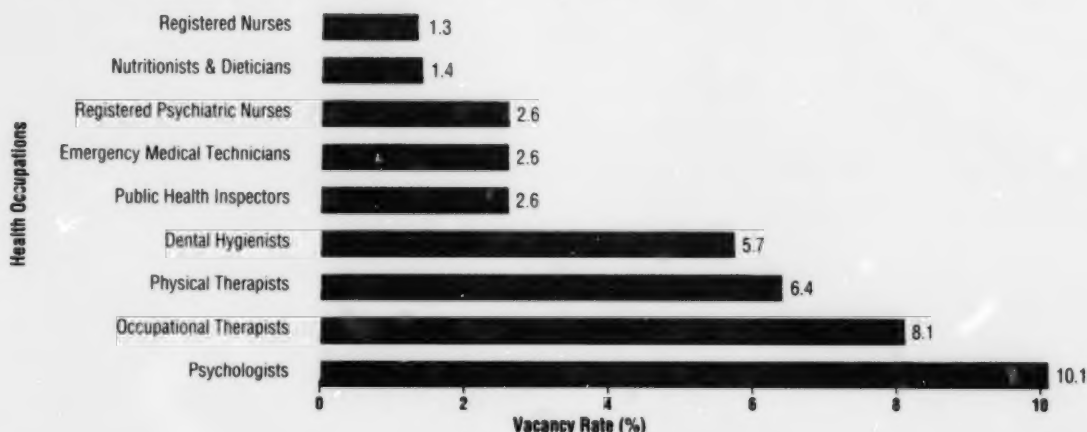
Organization

The branch is divided into three units: Policy and Intergovernmental Liaison, Human Resources and Legislation, and Economics and Evaluation.

Major Activities

- Coordinated briefing materials for interprovincial and federal-provincial meetings for the Minister and Deputy Minister.
- Provided continuing research and evaluation services to other branches within the department:
 - Conducted a major evaluation of food handler practices in conjunction with Community Health-Prevention Services Branch.
 - Assisted in a province-wide review of community health and social centres.
- Conducted an annual health employer survey to identify vacancy rates and regional and provincial supply and demand for 55 health occupations in Saskatchewan.

Figure 5
Vacancy Rates for Selected Health Occupations
(1991 Saskatchewan Health Employer Survey)



-
- Formalized procedures for preparing and processing Minister's appointments to various boards and agencies.
 - Represented the department on a variety of national and provincial boards, committees and work groups.
 - Provided staff support to the Deputy Minister's Office on a wide range of issues.

For more information, contact:

Policy and Health Economics Branch
Saskatchewan Health
3475 Albert Street
Regina, Saskatchewan
S4S 6X6
Phone: (306) 787-3143

Corporate Information and Technology

Objectives

The Corporate Information and Technology Branch assists branches with planning and coordinating automated systems development and implementation.

Highlights

- Established a microcomputer software library for department staff use.
- Maintained a central support centre for microcomputer users.
- Worked with branches to help define their microcomputer application needs and to help them tender for development services, including the new supplementary health and ambulance call systems.
- Continued to improve data communications and data-sharing by expanding and upgrading the central microcomputer local area network which connects 180 users.
- Initiated development of a computer research database. This system will further integrate health data by allowing branches to share information, which in turn, helps the department to work in a more cost-efficient way.

Organization

The branch consists of units responsible for systems consulting and application development, user support and local area network administration, technology acquisition, and coordinating development of the department's computerized information database.

Major Activities

The branch provides services to the department by:

- establishing and maintaining a department informatics strategic plan;
- providing computer support to the microcomputer users;
- providing central coordination of all hardware and software acquisitions;
- assisting branches in preparing proposals for acquiring computer hardware, software and related consulting services;
- liaising with outside agencies and vendors to acquire computer hardware, software and other resources;
- providing and coordinating central microcomputer training; and
- coordinating the establishment of department policies and standards on computer technology and procedures.

For more information, contact:

Corporate Information and Technology Branch
Saskatchewan Health
3475 Albert Street
Regina, Saskatchewan
S4S 6X6
Phone: (306) 787-3043

Human Resources and Fee Negotiation

Objectives

The Human Resources and Fee Negotiation Branch provides comprehensive human resource and staff development services to the department.

Highlights

- In cooperation with the Saskatchewan Medical Association, awarded 15 new bursaries to medical students who will practise in rural Saskatchewan.
- Funded 19 new and 40 continuing bursaries in difficult-to-recruit professions such as occupational and physical therapy, public health inspection and speech pathology.
- Undertook extensive recruitment for difficult-to-recruit professions, including producing a special recruitment bulletin.
- Conducted a survey of all staff to support Employment Equity initiatives.
- Helped develop strategies for collective bargaining.
- Improved service to the public and enhanced employee participation by facilitating workshops and branch initiatives designed to suit the department's and employees' specific needs.

Organization

The branch delivers services in three major areas: Human Resources, Staff Development and Fee Negotiation.

Major Activities

Human Resource Management

Human Resource Management delivers department-wide support services that include:

- consultation services on managing the human resource function;

- helping managers by:

- interpreting collective agreements; participating in the collective bargaining process; and assisting with grievance resolution, corrective discipline and performance management;
- providing advice on organization design, including classification and compensation matters;
- assisting in hiring; and
- administering employee benefits plans and records management; and

- administering a comprehensive employee recognition program.

Staff Development

Staff Development works with department managers and individual employees to develop a strategy and plan to meet branch and individual staff development priorities, using a creative range of tools such as taped learning, book reviews, teleconferences and lunch presentations. It also administers a bursary program to meet demands for difficult-to-recruit professions.

Fee Negotiation

In conjunction with branch managers, the branch negotiates fee schedules for professional groups such as physiotherapists, dentists, denturists and optometrists.

For more information, contact:

Human Resources and Fee Negotiation Branch
Saskatchewan Health
3475 Albert Street
Regina, Saskatchewan
S4S 6X6
Phone: (306) 787-6125

Communications

Objectives

The Communications Branch offers advice and support in planning, creating and delivering information to the public about the department's programs and services.

Highlights

- Coordinated information distribution and media arrangements for projects such as:
 - the appointment of the Saskatoon and Regina Health Boards; and
 - the establishment of the Health Services Utilization and Research Commission, which examines health service use in the province.
- Produced a writing styleguide and refashioned and led department writing workshops in support of the new government Clear Language initiative.
- Coordinated and developed with Health Promotion Branch projects such as a healthy living goals and objectives video and a self-esteem video, both of which promote healthy living and encourage responsible decisions about health.

Organization

The branch reports to the senior associate deputy minister.

Major Activities

The branch provides service to the department by:

- developing the annual paid communications plan;
- developing individual communication plans for major initiatives;

- providing design and production advice on print, audiovisual, television and radio production projects;
- liaising with outside production agencies;
- producing department news releases and planning and coordinating news conferences;
- preparing speaking notes for the Minister, Deputy Minister and their designates;
- coordinating special events such as sod turnings and hospital/special-care home openings;
- coordinating non-paid media programs;
- preparing the department's annual report;
- providing a media monitoring service on health issues;
- providing a centralized department photo library; and
- fielding calls from the public on the Saskatchewan Health Inquiry Line.

For more information, contact:

Communications Branch
Saskatchewan Health
3475 Albert Street
Regina, Saskatchewan
S4S 6X6
Phone: (306) 787-3696

Finance and Administration

Objectives

The Finance and Administration Branch provides financial and administrative support services to department programs that help them meet the department's goals and objectives.

Highlights

- Established the Freedom of Information coordination function in order to respond to the public's requests for information under the new *Freedom of Information and Protection of Privacy Act*.
- Consistently met government's targets for timely payments to suppliers, and provided branches with feedback on their performance in processing these payments.
- Implemented a corporate credit card program to support employee travel requirements and to improve cash management by reducing the need for cash travel advances.

Organization

The branch is divided into three units: Financial Services, Accounting, and Property Management.

Major Activities

The branch provides timely financial and administrative support services appropriate to the needs of department programs. These services are:

- financial and administrative policy development and advice;
- budgeting and forecasting;
- accounts payable and receivable;
- payroll;
- procurement and stockroom services;
- accommodation management;
- central mail and records management;
- recoveries from the federal government under federal-provincial cost-sharing agreements; and
- central coordination of Freedom of Information requests.

For more information, contact:

Finance and Administration Branch
Saskatchewan Health
3475 Albert Street
Regina, Saskatchewan
S4S 6X6
Phone: (306) 787-3052



Table 5
Saskatchewan Health Revenue and Expenditures
1990-91 to 1991-92

		Total (\$ Thousands)		Percentage Distribution
		1990-91	1991-92*	1991-92
Revenue	(1)	\$ 25,667	\$ 35,852	
Operating Expenditures:				
Acute Care				
Hospital Services	(2)	\$ 663,516	\$ 677,754	43.8
Saskatchewan Cancer Foundation	(4)	24,199	25,925	1.7
Ambulance Services	(5)	11,366	12,524	0.8
SUBTOTAL		699,081	716,203	46.3
Grants to Special-care Facilities		220,202	229,288	14.8
Insured Services				
Medical Care Insurance		271,789	285,267	18.5
Prescription Drug Plan		89,672	91,365	5.9
Children's Dental Plan	(3)	10,992	10,346	0.7
Supplementary Health Services	(3)	6,979	7,829	0.5
SUBTOTAL		379,432	394,807	25.6
Community Services				
Grants and Allowances for Home Care		30,143	32,436	2.1
Mental Health Services		33,471	35,259	2.3
Community Health Services		16,454	17,185	1.1
Grants to Health Agencies	(4)	23,830	24,911	1.6
Saskatchewan Alcohol and Drug Abuse Commission		14,869	15,938	1.0
Laboratory and Disease Control		12,003	12,995	0.8
Saskatchewan Aids to Independent Living		10,894	11,827	0.8
Saskatchewan Hearing Aid Plan		2,357	2,297	0.2
Northern Health Services		5,968	6,214	0.4
SUBTOTAL		149,989	159,062	10.3
Other				
Accommodation and Mail		14,736	17,981	1.2
Administration and Support Services	(6)	29,436	27,565	1.8
SUBTOTAL		44,172	45,546	3.0
TOTAL OPERATING EXPENDITURES		1,492,876	1,544,906	100.0
Capital Expenditures	(7)	71,612	59,201	
Total Expenditures		\$1,564,488	\$1,604,107	

- (1) Includes federal cost-sharing which involves the Canada Assistance Plan, Vocational Rehabilitation of Disabled Persons and other programs (about 80% of the total), and fees and charges for services rendered through Vital Statistics, the Hearing Aid Plan and the Chiroprody program, etc. (20% of the total).
- (2) Includes payments under *The Hospital Revenue Act*.
- (3) Dental services associated with social assistance clients are included in Supplementary Health Services.
- (4) Grants to health agencies include grants to city health departments and other health agencies, grants assisting clinical services provided by the medical education system, grants to the Saskatchewan Health Research Fund, grants for mental health services and grants for cancer research.
- (5) Includes grants to ambulance district boards and payments for air ambulance services.
- (6) Includes administration and support services for the following programs: General Administration, Human Resources and Health Compensation, Policy and Health Economics, Vital Statistics and Health Registration, Medical Care Insurance, Hospital and Ambulance, Prescription Drug Plan, Continuing Care, Health Education and Promotion, Corporate Information and Technology, and Members of the Executive Council.
- (7) Comprised of project loans advanced through Saskatchewan Property Management Corporation, it does not include loan repayments.

* Unaudited

Figure 6
Saskatchewan Health Expenditures,
1991-92 (\$000's)

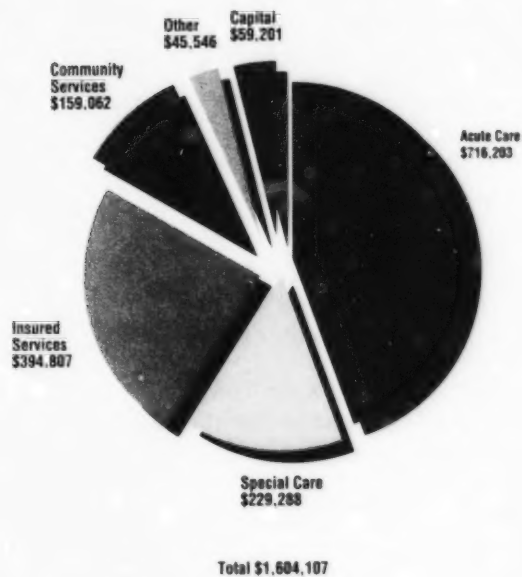


Figure 7
Saskatchewan Health Program Spending,
1991-92 (\$000's)

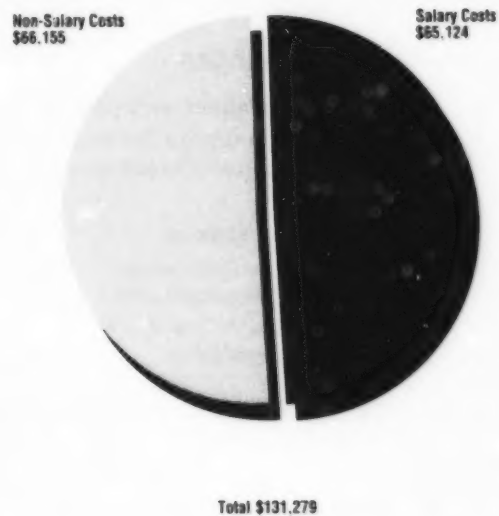
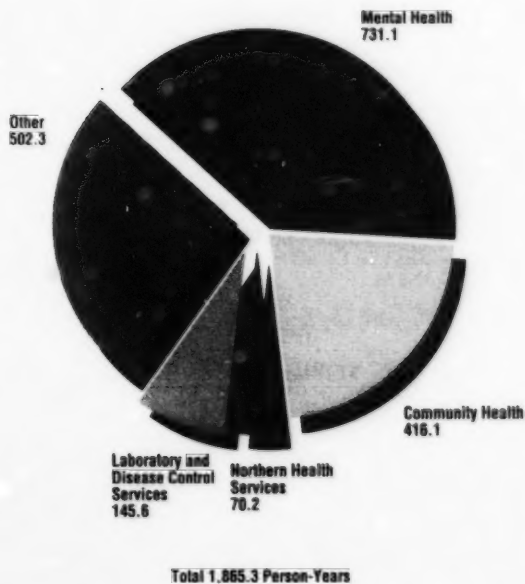


Figure 8
Saskatchewan Health Person-Years, 1991-92



Other includes:
 General Administration
 Corporate Information and Technology
 Human Resources and Health Compensation
 Health Education and Promotion
 Policy and Health Economics
 Vital Statistics and Health Registration
 Medical Care Insurance Administration
 Hospital and Ambulance Administration
 Prescription Drug Plan Administration
 Continuing Care Administration

Summary of Legislation

The Medical Profession Act was amended to allow locum tenens (short-term) physicians to provide service for longer periods of time in Saskatchewan communities.

The Medical Laboratory Licensing Act came into force on April 1, 1991 as did *The Personal Care Homes Act* on October 1, 1991.

Regulatory Changes

The following regulations were passed:

The Hospital Comprehensive Purchasing Regulations
The Personal Care Homes Regulations

Amendments were made to:

The Change of Name Regulations
The Saskatchewan Hospitalization Regulations
The Hospital Standards Regulations, 1980
The Hearing Aid Regulations
The Vital Statistics Regulations
The Public Health Services Grants (Regina and Saskatoon) Regulations

Acts Administered by Saskatchewan Health

The Abandoned Refrigerator Act
The Ambulance Act
The Anatomy Act
The Change of Name Act
The Dental Care Act
The Department of Health Act
The Health Services Act
The Hearing Aid Act
The Hospital Revenue Act
The Hospital Standards Act
The Housing and Special-care Homes Act
The Medical and Hospitalization Tax Repeal Act
The Medical Laboratory Licensing Act
The Mental Health Services Act
The Mutual Medical and Hospital Benefit Associations Act
The Personal Care Homes Act
The Prescription Drugs Act
The Public Health Act
The Saskatchewan Health Insurance Act
The Saskatchewan Hospitalization Act
The Union Hospital Act
The Venereal Disease Prevention Act
The Vital Statistics Act

Acts in which Saskatchewan Health has a Direct Interest

The Alcohol and Drug Abuse Commission Act
The Cancer Foundation Act
The Certified Nursing Assistants Act
The Chiropody Profession Act
The Chiropractic Act
The Community Health Unit Act
The Dental Profession Act, 1978
The Dental Technicians Act
The Dental Therapists Act
The Denturists Act
The Emergency Medical Aid Act
The Health Research Act
The Home Care Act
The Human Tissue Gift Act
The Lloydminster Hospital Act, 1948
The Medical Care Insurance Supplementary Provisions Act
The Medical Profession Act, 1981
The Medical Radiation Technologists Act
The Medical Scholarships and Bursaries Act
The Naturopathy Act
The Ophthalmic Dispensers Act
The Optometry Act, 1985
The Osteopathic Practice Act
The Pharmacy Act
The Physical Therapists Act, 1984
The Professional Dietitians Act
The Psychiatric Nurses Act
The Registered Nurses Act, 1988
The Registered Occupational Therapists Act
The Registered Psychologists Act
The Saskatchewan Embalmers Act
The Saskatchewan Medical Care Insurance Act
The South Saskatchewan Hospital Centre Act
The Tuberculosis Sanatoria and Hospitals Act
The University Hospital Act
The Wascana Rehabilitation Centre Act
The White Cane Act